



Application for Employment with Yogurt Sundae

Name: _____ SSN: _____
First Middle Last

Address: _____
Street City State Zip

Birthdate: _____ Email: _____

Phone Number: Home (____) _____ - _____ Cell: (____) _____ - _____

Emergency Contact: _____ Phone: (____) _____ - _____

Are you legally allowed to work in the United States? Yes ___ No ___

Have you ever been convicted, pled guilty or no contest to a crime? Yes ___ No ___
(A 'yes' answer does not automatically disqualify you from further consideration)

If yes, please explain: _____

How did you hear about the job?

___ Store banner ___ Newspaper ad ___ Walk in ___ Internet

___ Other (please explain): _____

If referred, by whom: _____

Date you can start: _____ Type of position desired: ___ Part Time ___ Full Time ___ Casual

What is the maximum number of hours you can work per week? _____ Minimum? _____

Availability:

	SUN	MON	TUES	WED	THURS	FRI	SAT
From							
To							

Are you currently employed? ___ Yes ___ No

Do you plan to keep working there if you work for Yogurt Sundae? ___ Yes ___ No

High School (last attended): _____ Location: _____

Grade: _____

Did you graduate? ___ Yes ___ No

If no, did you earn a GED? ___ Yes ___ No

Post Secondary (last attended): _____ Location: _____

Did you graduate? ___ Yes ___ No

Major: _____ Degree/Diploma: _____

Are you in school now? ___ Yes ___ No Do you plan on returning to school? ___ Yes ___ No

If yes, when? _____



Skills:

List some of your interests and activities, including volunteer work, awards, honors.

List previous customer service experience: _____

Is there any reason you would not be able to stand for extended periods of time?

Explain: _____

Do you have any allergies to foods or cleaning products: _____

Good attendance is important at Yogurt Sundae. Is there anything that we should be aware of that would cause you to be late or absent for shifts other than illness?

Please list all previous employers, starting with the most recent:

Dates		Employer	Responsibilities	Type of business	Pay Rate	Reason for leaving
From	Name				Starting	
To	Address Phone			Supervisor	Ending	
From	Name				Starting	
To	Address Phone			Supervisor	Ending	
From	Name				Starting	
To	Address Phone			Supervisor	Ending	

May your employers be contacted for reference? _____

I certify the facts contained in this application are true and complete. I understand that, if employed, false statements or omissions on this application are grounds for dismissal. I understand and agree that, if hired, my employment is for no definite period of time and either I or the company can terminate employment relations at any time, with or without cause, with or without notice for any lawful reason. This employment relationship exists regardless of any other statements or policies to the contrary. I give my authorization to verify all information provided in this application, including, but not limited to, pre-employment and background verifications.

Signature _____ Date _____